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FACSIMILE TRANSMITTAL

TO:

FROM:

Name: Mail Stop AMENDMENT

Name:

Amedeo F. Ferraro, Esq.

Group Art Unit 3772/Examiner Michael Brown

Firm: U.S. Patent & Trademark Office

Phone No.: (310) 286-2795

Fax No.: 571-273-8300

No. of Pages (including this): 45

Subject: U.S. Patent Application No. 08/480,461

Date:

February 13, 2008

Gary K. Michelson Filed: June 7, 1995

INSTRUMENTATION FOR THE SURGICAL CORRECTION OF HUMAN THORACIC AND LUMBAR SPINAL DISEASE FROM THE LATERAL ASPECT OF THE SPINE

Attorney Docket No. 102.0010-01000

Customer No. 22882 Confirmation No.: 9274 Confirmation Copy to Follow: NO

Message:

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the attached Transmittal Form (in duplicate), Amendment with Replacement Drawings (14 sheets), and copies of Form PTO-1449 and Form PTO/SB/08 associated with the Information Disclosure Statements dated July 26, 2001 and November 19, 2007, respectively, are being facsimile transmitted to the U.S. Patent and Trademark Office on February 13, 2008.

liyabi Grace Forker

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FORM PTO-1083

Attorney Docket No.: 102.0010-01000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In reapplication of: Gary K. Michelson, M.D. Serial No: 08/480,461 Filed: June 7, 1995

INSTRUMENTATION FOR THE SURGICAL **CORRECTION OF HUMAN THORACIC AND** LUMBAR SPINAL DISEASE FROM THE LATERAL ASPECT OF THE SPINE

Confirmation No.: 9274

Art Unit: 3772 Examiner: Michael Brown

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Mail Stop AMENDMENT Commissioner for Patent P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Transmitted herewith is an Amendment (with Replacement Drawings) in reply to the Office Action of February 4, 2008 in the above-identified application.

No additional fee is required.

Applicant hereby requests a *** -month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUME PREVIOUSLY PAIL		(Col. 3) PRESENT EXTRA*		LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	148	-	148	**	0	`LG=\$50 SM=\$25	\$50	\$	0	
INDEPENDENT CLAIMS FEE	9	-	13	***	· 0 ·	LG=\$210 SM=\$105	\$210	\$	0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$370 SMALL ENTITY FEE = \$185							\$.0		
							TOTAL	\$	0	

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior emendment or the number of claims originally filed.

The total amount of \$*** to cover the above fees is to be charged to Deposit Account No. 50-3726.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-3726. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted. MARTIN & FERRARO, LLP

Date: February 13, 2008

1557 Lake O'Pines Street, NE Hartville, Ohio 44632

Telephone: (310) 286-9800 Facsimile: (310) 286-2795

medeo F. Ferraro Registration No. 37,129 **FORM PTO-1083**

Attorney Docket No.: 102.0010-01000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gary K. Micheison, M.D. Serial No: 08/480.461

Flied: June 7, 1995

For: INSTRUMENTATION FOR THE SURGICAL

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Art Unit 3772

Examiner: Michael Brown

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TOTAL CLAIMS FEE	148	-	148	**	0	LG=\$50 \$50 SM=\$25	s	0
INDEPENDENT CLAIMS FEE	9	-	13	. ***	0	LG=\$210 SM=\$106 \$210	. \$	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$18 SMALL ENTITY FEE = \$18							0	
						TOTAL	\$	D

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

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If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

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Date: February 13, 2008

medeo F. Ferraro Registration No. 37,129

1557 Lake O'Pines Street, NE Hartville, Ohio 44632 Telephone: (310) 286-9800 Facsimile: (310) 286-2795

02/13/2008 14:35

#315 P. 004/045

PATENT Attorney Docket No. 102.0010-01000 Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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) Confirmation No.: 9274
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) Group Art Unit: 3772
) Examiner: Michael Brown
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Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

AMENDMENT

In reply to the Office Action dated February 4, 2008, the following amendments and remarks are submitted as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Amendments to the Drawings begin on page 22 of this paper and include replacement sheets.

Remarks begin on page 23 of this paper.

An **Appendix** including replacement drawing figures is attached following page 24 of this paper.

Amendment 2-13-08